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APPLICANTS									
Graydon Ernest Be	eatty,	St. Paul, MN;							
Jonathan Kagan, i Jeffrey Robert Bud		apolis, MN; . Paul, MN;John Ander	son Hau	ck, Shoreview,	, MN;		•		
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** FOREIGN APPL	.ICAT	IONS ************************************	··· a	. O. C	^ av	ore)			
IF REQUIRED, FO ** 06/17/2000	REIG	N FILING LICENSE G		** SMALL E	NTITY				
Foreign Priority claimed 35 USC 119 (a-d) condi met Verified and	SC 119 (a-d) conditions yes no Met after Allowance			STATE OR		HEETS	TOTAL,	INDEPENDENT	
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ADDRESS 21834 BECK AND TYSVE 2900 THOMAS AV SUITE 100 MINNEAPOLIS , M 55419	ENU	E SOUTH		***************************************	*******************************				
TITLE Interface system fo	or end	ocardial mapping cath	eter						
	ING FEE FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT					☐ All Fees			
						☐ 1.16 Fees (Filing)			
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